

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	VINN	11	03-22-01
FORMALITY REVIEW	MD	579	5/30/01
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	✓
2	✓
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9	✓
10	0
11	✓
12	(3)
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16	✓
17	✓
18	✓
19	✓
20	✓
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Claim	Date
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here

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